

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N26906

**FILED**  
**Feb 01, 2016**  
**Secretary of State**  
**CC4393161411**

**Entity Name:** FIRST BAPTIST CHURCH OF ARCADIA, INC.

**Current Principal Place of Business:**

1006 N. BREVARD AVE  
ARCADIA, FL 34266

**Current Mailing Address:**

1006 N. BREVARD AVE  
ARCADIA, FL 34266 US

**FEI Number:** 59-0689702

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BROWN, FLETCHER  
124 N. BREVARD AVE.  
ARCADIA, FL 34266 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title V, D  
Name WILLIAMS, MARVIN  
Address 4443 N.E. C.R.661-A  
City-State-Zip: ARCADIA FL 34266

Title T  
Name SORRELLS, STEVE  
Address 6923 CR 661  
City-State-Zip: ARCADIA FL 34266

Title D  
Name SCOTT, JEREMIAH  
Address 3548 S.E. BROWN RD  
City-State-Zip: ARCADIA FL 34266

Title PRESIDENT  
Name ALLEN, RONNIE D  
Address 10057 N.W. LILY COUNTY LINE ROAD  
City-State-Zip: ONA FL 33865

Title SECRETARY  
Name GAMIOTE, KATHEY  
Address P.O. BOX 1638  
83 W. GRANGER ST.  
City-State-Zip: ARCADIA FL 34265

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: RONNIE ALLEN**

**PRESIDENT**

**02/01/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date